

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Bonalday | | 03-22-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | A.T | 1071 | 7/30/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
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| 31 | 0 |
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| 35 | ✓ |
| 36 | 0 |
| 37 | = = 0 |
| 38 | ✓ ✓ ✓ |
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| 46 | V |
| 47 | / = ✓ |
| 48 | V |
| 49 | ✓ |
| 50 | 0 |

| Claim | Date |
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| Final | |
| Original | |
| 51 | ✓ |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here